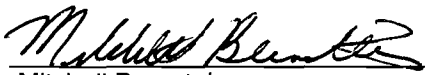
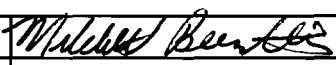


| | | | | |
|--|---|---|-----------------------------------|--------|
| AMENDMENT TRANSMITTAL LETTER | | | Docket No. 20555/1203301-US1 | |
| Application No. 09/402,820-Conf. #6495 | Filing Date October 12, 1999 | Examiner Patricia A. Duffy | Art Unit 1645 | |
| Applicant(s): Daniel G. Chain | | | | |
| Invention: RECOMBINANT ANTIBODIES SPECIFIC FOR BETA-AMYLOID ENDS, DNA ENCODING AND METHODS OF USE THEREOF | | | | |
| TO THE COMMISSIONER FOR PATENTS | | | | |
| Transmitted herewith is an amendment in the above-identified application. | | | | |
| The fee has been calculated and is transmitted as shown below. | | | | |
| CLAIMS AS AMENDED | | | | |
| | Claims Remaining After Amendment | Highest Number Previously Paid | Number Extra Claims Present | Rate |
| Total Claims | 6 | - 22 = | | x |
| Independent Claims | 2 | - 3 = | | x |
| Multiple Dependent Claims (check if applicable) <input type="checkbox"/> | | | | |
| Other fee (please specify): Extension for response within third month | | | | 510.00 |
| TOTAL ADDITIONAL FEE FOR THIS AMENDMENT: | | | | 510.00 |
| <input type="checkbox"/> Large Entity <input checked="" type="checkbox"/> Small Entity | | | | |
| <input type="checkbox"/> No additional fee is required for this amendment. | | | | |
| <input type="checkbox"/> Please charge Deposit Account No. <u>04-0100</u> in the amount of \$ _____. A duplicate copy of this sheet is enclosed. | | | | |
| <input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed. | | | | |
| <input checked="" type="checkbox"/> Payment by credit card in the amount of <u>\$510.00</u> . | | | | |
| <input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>04-0100</u> as described below. | | | | |
| <input checked="" type="checkbox"/> Credit any overpayment. | | | | |
| <input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17. | | | | |
|  Mitchell Bernstein Attorney/Agent Reg. No.: 46,550 | | | Dated: <u>April 3, 2007</u> | |
| DARBY & DARBY P.C. P.O. Box 5257 New York, New York 10150-5257 (212) 527-7708 | | | | |

| | | | |
|---|--|---------------------------------|------------------------|
| <p><i>Effective on 12/08/2004.</i> <i>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</i></p> <h2 style="margin: 0;">FEE TRANSMITTAL</h2> <h3 style="margin: 0;">For FY 2007</h3> | | <p>Complete if Known</p> | |
| <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27 | | Application Number | 09/402,820-Conf. #6495 |
| | | Filing Date | October 12, 1999 |
| | | First Named Inventor | Daniel G. Chain |
| | | Examiner Name | Patricia A. Duffy |
| | | Art Unit | 1645 |
| TOTAL AMOUNT OF PAYMENT | | (\$) | 510.00 |
| | | Attorney Docket No. | 20555/1203301-US1 |

| | |
|---|--|
| METHOD OF PAYMENT (check all that apply) | |
| <input type="checkbox"/> Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____ | |
| <input type="checkbox"/> Deposit Account Deposit Account Number: 04-0100 Deposit Account Name: Darby & Darby P.C. | |
| For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) | |
| <input type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee | |
| <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Credit any overpayments | |

| | | | | | | | |
|---|--------------------|---------------------|--------------------|---|-------------------------|----------------------|-----------------------|
| FEE CALCULATION | | | | | | | |
| 1. BASIC FILING, SEARCH, AND EXAMINATION FEES | | | | | | | |
| | FILING FEES | | SEARCH FEES | | EXAMINATION FEES | | |
| | | <u>Small Entity</u> | | <u>Small Entity</u> | | <u>Small Entity</u> | |
| <u>Application Type</u> | <u>Fee (\$)</u> | <u>Fee (\$)</u> | <u>Fee (\$)</u> | <u>Fee (\$)</u> | <u>Fee (\$)</u> | <u>Fee (\$)</u> | <u>Fees Paid (\$)</u> |
| Utility | 300 | 150 | 500 | 250 | 200 | 100 | _____ |
| Design | 200 | 100 | 100 | 50 | 130 | 65 | _____ |
| Plant | 200 | 100 | 300 | 150 | 160 | 80 | _____ |
| Reissue | 300 | 150 | 500 | 250 | 600 | 300 | _____ |
| Provisional | 200 | 100 | 0 | 0 | 0 | 0 | _____ |
| 2. EXCESS CLAIM FEES | | | | | | | |
| | | | | | | <u>Small Entity</u> | |
| | | | | | | <u>Fee (\$)</u> | <u>Fee (\$)</u> |
| Each claim over 20 (including Reissues) | | | | | | 50 | 25 |
| Each independent claim over 3 (including Reissues) | | | | | | 200 | 100 |
| Multiple dependent claims | | | | | | 360 | 180 |
| <u>Total Claims</u> | | <u>Extra Claims</u> | | <u>Fee (\$)</u> | | <u>Fee Paid (\$)</u> | |
| 6 - 42 = _____ | | x _____ | | = _____ | | | |
| HP = highest number of total claims paid for, if greater than 20. | | | | | | | |
| <u>Indep. Claims</u> | | <u>Extra Claims</u> | | <u>Fee (\$)</u> | | <u>Fee Paid (\$)</u> | |
| 2 - 6 = _____ | | x _____ | | = _____ | | | |
| HP = highest number of independent claims paid for, if greater than 3. | | | | | | | |
| 3. APPLICATION SIZE FEE | | | | | | | |
| If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). | | | | | | | |
| <u>Total Sheets</u> | | <u>Extra Sheets</u> | | <u>Number of each additional 50 or fraction thereof</u> | | <u>Fee (\$)</u> | |
| _____ - 100 = _____ | | /50 | | (round up to a whole number) x _____ | | = _____ | |
| | | | | | | <u>Fee Paid (\$)</u> | |
| 4. OTHER FEE(S) | | | | | | | |
| Non-English Specification, \$130 fee (no small entity discount) | | | | | | | |
| Other (e.g., late filing surcharge): 2253 Extension for response within third month | | | | | | 510.00 | |

| | | | |
|---------------------|---|-----------------------------------|----------------|
| SUBMITTED BY | | | |
| Signature |  | Registration No. (Attorney/Agent) | 46,550 |
| Name (Print/Type) | Mitchell Bernstein | Telephone | (212) 527-7708 |
| | | Date | April 3, 2007 |